

## **APPLICATION DATA SHEET**

### **Application Information**

Application Type::	Regular
Subject Matter::	Utility
CD-ROM or CD-R?::	None
Title::	System-Level Simulation of Interconnected Devices
Attorney Docket Number::	CDS-007
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	FIG. 2
Total Drawing Sheets::	9
Small Entity?::	No
Secrecy Order in Parent Appl.?::	No

### **Applicant Information**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	U.S.A.
Status::	Full Capacity
Given Name::	William
Middle Name::	
Family Name::	Neifert
Name Suffix::	
City of Residence::	Arlington
State or Province of Residence::	Massachusetts
Country of Residence::	U.S.A.
Street of Mailing Address::	100 Pleasant Street, #31
City of Mailing Address::	Arlington
State or Province of Mailing Address::	Massachusetts
Country of Mailing Address::	U.S.A.
Postal or Zip Code of Mailing Address::	02476

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: U.S.A.  
Status:: Full Capacity  
Given Name:: Matthew  
Middle Name::  
Family Name:: Bellantoni  
Name Suffix::  
City of Residence:: Brookline  
State or Province of Residence:: Massachusetts  
Country of Residence:: U.S.A.  
Street of Mailing Address:: 60 East Glen Road T-12  
City of Mailing Address:: Brookline  
State or Province of Mailing Address:: Massachusetts  
Country of Mailing Address:: U.S.A.  
Postal or Zip Code of Mailing Address:: 02445

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: U.S.A.  
Status:: Full Capacity  
Given Name:: Andrew  
Middle Name::  
Family Name:: Ladd  
Name Suffix::  
City of Residence:: Maynard  
State or Province of Residence:: Massachusetts  
Country of Residence:: U.S.A.  
Street of Mailing Address:: 20-6 Deer Path Lane  
City of Mailing Address:: Maynard  
State or Province of Mailing Address:: Massachusetts  
Country of Mailing Address:: U.S.A.  
Postal or Zip Code of Mailing Address:: 01754

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: U.S.A.  
Status:: Full Capacity  
Given Name:: Matthew  
Middle Name::  
Family Name:: Grasse  
Name Suffix::  
City of Residence:: Watertown  
State or Province of Residence:: Massachusetts  
Country of Residence:: U.S.A.  
Street of Mailing Address:: 56 Harrington Street  
City of Mailing Address:: Watertown  
State or Province of Mailing Address:: Massachusetts  
Country of Mailing Address:: U.S.A.  
Postal or Zip Code of Mailing Address:: 02472

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: U.S.A.  
Status:: Full Capacity  
Given Name:: Mark  
Middle Name::  
Family Name:: Kostick  
Name Suffix::  
City of Residence:: Belmont  
State or Province of Residence:: Massachusetts  
Country of Residence:: U.S.A.  
Street of Mailing Address:: 30 Fairview Avenue  
City of Mailing Address:: Belmont  
State or Province of Mailing Address:: Massachusetts  
Country of Mailing Address:: U.S.A.  
Postal or Zip Code of Mailing Address:: 02478

**Correspondence Information**

Correspondence Customer Number:: **021323**

**Representative Information**

Representative Customer Number:: **021323**